2009 Delaware Withholding Record Code Table Information Sheet for 8th-Monthly Annual Reconciliation Coupon

Withholding Scanline and Design Clarification for Software Developers (To be used in conjunction with the *Scanline Spec Sheet*.)

The approximate size of a Withholding Coupon is not to exceed 8 ½" x 3 ¾". Withholding Coupons are to be personalized with the taxpayer's name, address and other variable information. Variable information can be displayed in any readable font that fits within the space provided.

There is one scanline for each personalized coupon. It is 54 characters in length. The scanline must be in OCRA font. It must appear at the center of an invisible block on each form whose base is 2.4" from the bottom of the form and whose top is 2.9" inches from the bottom of the form. The scanline must begin .25" to .50" away from the left edge. Print quality of the scanline must be at a 99% rate.

All Withholding Coupons must pass both a *Design Approval* process and a *Test Document* process.

For Design Approval, e-mail a PDF or mail a hardcopy of the coupon to the Delaware Division of Revenue.

This coupon does not need to be personalized.

For Test Document Approval, please mail only pre-cut hardcopies to the Division of Revenue.

One test document must be submitted for each Annual Reconciliation form.

All test documents must be personalized with sample variable information.

All must include (somewhere on the coupon) the name of the software company for identification purposes.

Attn: Angela Moffett Delaware Division of Revenue 820 N. French Street Wilmington, DE 19801

Scanline Information for an 8th-Monthly Annual Reconciliation for Withholding Coupon:

Revenue Code	Sub-Type	Filing Frequency	Tax Period End Date	Due Date
0089	08	09	Last Day of Tax Year	The Last Day of February following the Tax Period End

Sample Design for 8th-Monthly Annual Reconciliation Withholding Coupon:

Information highlighted below in **Red** is unique to 8th-Monthly Annual Rec forms. Variable information is highlighted in **Purple**.

Mail This Form With Remittance Payable To: STATE OF DELAWARE DIVISION OF REVENUE THE REQUEST FOR CHANGE FORM. 2. Number of Withholding Statements (Form W-2 and/or 1099 attached.)	1-234567890-002	TAX PERIOD ENDING 12-31-2009		R BE FORE -2010		
Remittance Payable To: THE REQUEST FOR CHANGE FORM. CHECK THE BOX IF YOU ARE FILLING A CHANGE FORM. DIVISION OF REVENUE P.O. BOX 8754 WILMINGTON, DE 19899-8754 CHECK THE BOX IF W-2(S) AND/OR 1099s ARE BEING SUBMITTED ELECTRONICALLY. 1. Amount of Delaware wages 1. Amount of Delaware wages 2. Number of Withholding Statements (Form W-2 and/or 1099 attached.) 3. Total Delaware Income Tax WITHHELD From Wages (as shown on attached forms) 4. Total Delaware Income Tax PAID during the year from back of this form.	00890809123456789	90002123109030)1100000	0000000	0000000007	Invisible Scanline Area
ARE FILING A CHANGE FORM. DIVISION OF REVENUE P.O. BOX 8754 WILMINGTON, DE 19899-8754 CHECK THE BOX IF W-2(S) AND/OR 1099s ARE BEING SUBMITTED ELECTRONICALLY. ARE FILING A CHANGE FORM. If you have questions, call (302) 577-8779. If you have questions, call (302) 577-8779. V. Total Delaware Income Tax WITHHELD From Wages (as shown on attached forms) 4. Total Delaware Income Tax PAID during the year from back of this form.		THE REQUEST FOR CHANGE FORM. CHECK THE BOX IF YOU ARE FILING A CHANGE FORM. If you have questions,		1. Amount o	of Delaware Wages	
P.O. BOX 8754 WILMINGTON, DE 19899-8754 CHECK THE BOX IF W-2(S) AND/OR 1099s ARE BEING SUBMITTED ELECTRONICALLY. If you have questions, call (302) 577-8779. 3. Total Delaware Income Tax WITHHELD From Wages (as shown on attached forms) 4. Total Delaware Income Tax PAID during the year from back of this form.						
CHECK THE BOX IF W-2(S) AND/OR 1099s ARE BEING SUBMITTED ELECTRONICALLY. 4. Total Delaware Income Tax PAID during the year from back of this form.	P.O. BOX 8754					6
5 Difference between Line 3 and Line 4	CHECK THE BOX IF W-2(S) AND/OR 1099s					
ABC Cleaners 121 Main Street Overpayment Balance Due						

TELEPHONE NUMBER

DATE